

● **SENDER:** Complete items 1, 2, and 3.  
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one.)

☒ Show to whom and date delivered. .... \$

☐ Show to whom, date and address of delivery. .... \$

☐ RESTRICTED DELIVERY

Show to whom and date delivered. .... \$

☐ RESTRICTED DELIVERY.

Show to whom, date, and address of delivery. \$

(CONSULT POSTMASTER FOR FEES)

2. **ARTICLE ADDRESSED TO:**

Mr. Robert Hautala  
Getty Oil Company  
P.O. Box 7900  
Salt Lake City, UT 84107

3. **ARTICLE DESCRIPTION:**

REGISTERED NO.

CERTIFIED NO.

INSURED NO.

P057075323

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE

☒ Addressee

☐ Authorized agent

4.

DATE OF DELIVERY

POSTMARK

5.

ADDRESS (Complete only if requested)

6.

UNABLE TO DELIVER BECAUSE:

CLERK'S  
INITIALS

# UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

## SENDER INSTRUCTIONS

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, and 3 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN  
TO**



State of Utah  
Natural Resources & Energy  
Oil, Gas, & Mining  
4241 State Office Building  
Salt Lake City, Utah 84114

(Name of Sender)

(Street or P.O. Box)

(City, State, and ZIP Code)



PENALTY FOR PRIVATE  
USE TO AVOID PAYMENT  
OF POSTAGE. \$300

P05 7075323

# RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—  
NOT FOR INTERNATIONAL MAIL

(See Reverse) ACT/045/017

SENT TO	
R. Hautala Getty Oil	
STREET AND NO.	
P.O. Box 7900	
P.O., STATE AND ZIP CODE	
Salt Lake City, UT 84107	

POSTAGE		\$
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE	¢
	SPECIAL DELIVERY	¢
		¢
	RESTRICTED DELIVERY	¢
	RETURN RECEIPT SERVICE	SHOW TO WHOM AND DATE DELIVERED
		SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY
		SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY
		SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY

TOTAL POSTAGE AND FEES	\$
------------------------	----

POSTMARK OR DATE



DOGM

PS Form 3800, Apr. 1976

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,  
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)**

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, **leaving the receipt attached**, and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.